

**STRUCTURAL PEST CONTROL BOARD**

1418 HOWE AVENUE, SUITE 18, SACRAMENTO, CA 95825

Telephone Numbers:



Administration Unit (916) 561-8700

Examination/Licensing /Records Storage (916) 561-8704

Complaint Unit (916) 561-8708

FAX (916) 263-2469

www.pestboard.ca.gov

REQUEST FOR CHANGE OF ADDRESS FEE \$25

PRINCIPAL OFFICE**BRANCH OFFICE****FOR BOARD USE ONLY**

Cashiering No.

Effective Date

Check by:

In accordance with Section 8613 of the Structural Pest Control Act notice is hereby given to the Structural Pest Control Board to change the address of record for:

Company Name:

Principal/Branch Office Registration No.

Former Address:

City

State

Zip

Phone No.

New Address:

City

State

Zip

Phone No.

Mailing Address:

City

State

Zip

ATTACH WALL CERTIFICATE FOR PRINCIPAL OR BRANCH OFFICE REGISTRATION ONLY.

Do not send wall licenses of individuals.

List all licenses affected by this change.

License No.

Name

A sole owner must sign this application personally.

A partnership application must be signed by each partner.

A corporate application must be signed by an officer of the corporation, a share holder, and each qualifying manager.

Signature

Title

Date